UNITED STATES BANKRUPTCY COURT

Northern	DISTRICT OF	Iowa

In Re. Mercy Hospital, Iowa City, Iowa, et al., Debtor(s)	 \$ Case No. 23-00623 \$ Lead Case No. 23-00623 ∑ Jointly Administered
Monthly Operating Report	Chapter 11
Reporting Period Ended: 02/29/2024	Petition Date: <u>08/07/2023</u>
Months Pending: 7	Industry Classification: 0 0 0 0
Reporting Method: Accrual Bas	sis • Cash Basis
Debtor's Full-Time Employees (current):	0
Debtor's Full-Time Employees (as of date of order for re	elief): <u>714</u>
Supporting Documentation (check all that are attach (For jointly administered debtors, any required schedules must Statement of cash receipts and disbursements Balance sheet containing the summary and detai Statement of operations (profit or loss statement Accounts receivable aging Postpetition liabilities aging Statement of capital assets Schedule of payments to professionals Schedule of payments to insiders All bank statements and bank reconciliations for Description of the assets sold or transferred and	st be provided on a non-consolidated basis for each debtor) iil of the assets, liabilities and equity (net worth) or deficit t)
Jim Porter	Jim Porter
Signature of Responsible Party	Printed Name of Responsible Party
03/20/2024 Date	500 E. Market Iowa City, IA 52245 Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.

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Case No. 23-00623

Debtor's Name Mercy Hospital, Iowa City, Iowa, et al.,

Pa	rt 1: Cash Receipts and Disbursements	Current Month	Cumulative
a.	Cash balance beginning of month	\$4,439,876	
b.	Total receipts (net of transfers between accounts)	\$8,952,963	\$86,851,330
c.	Total disbursements (net of transfers between accounts)	\$2,385,572	\$89,281,257
d.	Cash balance end of month (a+b-c)	\$11,007,267	
e.	Disbursements made by third party for the benefit of the estate	\$0	\$0
f.	Total disbursements for quarterly fee calculation (c+e)	\$2,385,572	\$89,281,257
	rt 2: Asset and Liability Status	Current Month	
a.	ot generally applicable to Individual Debtors. See Instructions.) Accounts receivable (total net of allowance)	\$11,937,603	
b.	Accounts receivable over 90 days outstanding (net of allowance)	\$15,099,668	
с.	Inventory (Book Market Other (attach explanation))	\$13,077,008	
d	Total current assets	<u> </u>	
	Total assets	\$210,599,451	
e.		\$287,563,544 \$134,675,062	
f.	Postpetition payables (excluding taxes)		
g.	Postpetition payables past due (excluding taxes)	\$0	
h.	Postpetition taxes payable	\$-286,863	
1.	Postpetition taxes past due		
j.	Total postpetition debt (f+h)	\$134,388,199	
k.	Prepetition secured debt	\$62,145,000	
1.	Prepetition priority debt	\$0	
m.	Prepetition unsecured debt	\$18,585,000	
n.	Total liabilities (debt) (j+k+l+m)	\$215,118,199	
о.	Ending equity/net worth (e-n)	\$72,445,346	
Pa	rt 3: Assets Sold or Transferred	Current Month	Cumulative
a.	Total cash sales price for assets sold/transferred outside the ordinary course of business	\$0	\$28,000,000
b.	Total payments to third parties incident to assets being sold/transferred		
	outside the ordinary course of business	\$0	\$876,862
c.	Net cash proceeds from assets sold/transferred outside the ordinary course of business (a-b)	\$0	\$27,123,138
	rt 4: Income Statement (Statement of Operations) ot generally applicable to Individual Debtors. See Instructions.)	Current Month	Cumulative
a.	Gross income/sales (net of returns and allowances)	\$488,600	
b.	Cost of goods sold (inclusive of depreciation, if applicable)	\$1,545,616	
c.	Gross profit (a-b)	\$-1,057,016	
d.	Selling expenses	\$0	
e.	General and administrative expenses	\$701,712	
f.	Other expenses	\$-9,098,484	
g.	Depreciation and/or amortization (not included in 4b)	\$0	
h.	Interest	\$1,997,212	
i.	Taxes (local, state, and federal)	\$0	
j.	Reorganization items	\$0	
k.	Profit (loss)	\$5,342,544	\$-33,325,825

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Debtor's Name Mercy Hospital, Iowa City, Iowa, et al.,

			Approved	Approved	Paid Current	Paid
			Current Month	Cumulative	Month	Cumulati
Debtor	r's professional fees & expenses (bankr	uptcy) Aggregate Total	\$332,464	\$3,355,474	\$615,425	\$5,685
Itemize	ed Breakdown by Firm					
	Firm Name Role					
i	McDermott Will & Emery LLP		\$0	\$2,054,073	\$0	\$2,054
ii	H2C Securities, Inc.	Financial Professional	\$0	\$157,908	\$20,000	\$157
iii	Susan N. Goodman	Other	\$18,941	\$46,707	\$10,779	\$38
iv	Nyemaster Goode, P.C.	Local Counsel	\$32,621	\$294,988	\$32,621	\$294
v	Cutler Law Firm, P.C.	Special Counsel	\$0	\$23,065	\$0	\$23
vi	FTI Consulting, Inc.	Financial Professional	\$61,572	\$243,349	\$61,572	\$173
vii	HBM Management Associates,	Special Counsel	\$0	\$25,000	\$0	\$25
viii	Sills Cummis & Gross, P.C	Special Counsel	\$219,330	\$510,385	\$0	\$154
ix	ToneyKorf Partners	Financial Professional	\$0	\$0	\$490,452	\$2,763
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				Current Month	Cumulative	Month	Cumulative
b.	Debtor	's professional fees & expenses (nonba	ankruptcy) Aggregate Total				
	Itemize	d Breakdown by Firm					
		Firm Name	Role				
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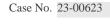
Debtor's Name Mercy Hospital, Iowa City, Iowa, et al.,					Case No. 23-00623			
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c.	c. All professional fees and expenses (debtor & committees)							

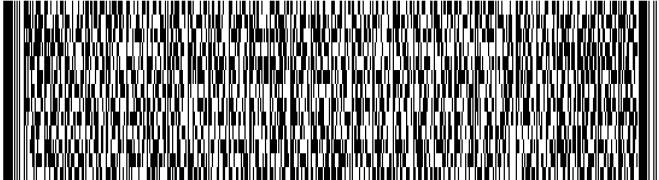
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Pa	rt 6: Postpetition	Taxes	Cur	rent Month	Cumulative
a.	Postpetition incom	me taxes accrued (local, state, and federal)		\$1,639	\$1,639
b.	Postpetition incom	me taxes paid (local, state, and federal)		\$0	\$0
c.	Postpetition empl	oyer payroll taxes accrued		\$-116,482	\$-116,482
d.	Postpetition empl	oyer payroll taxes paid		\$26,555	\$9,767,773
e.	Postpetition prop	erty taxes paid		\$0	\$0
f.	Postpetition other	taxes accrued (local, state, and federal)		\$169,055	\$169,055
g.	Postpetition other	taxes paid (local, state, and federal)		\$0	\$0
Pai	rt 7: Questionnair	re - During this reporting period:			
a.	Were any paymen	nts made on prepetition debt? (if yes, see Instructions)	Yes •	No 🔘	
b.		nts made outside the ordinary course of business roval? (if yes, see Instructions)	Yes 🔿	No 💿	
c.	Were any paymer	nts made to or on behalf of insiders?	Yes 🔘	No 💿	
d.	Are you current o	n postpetition tax return filings?	Yes •	No 🔘	
e.	Are you current o	n postpetition estimated tax payments?	Yes •	No 🔘	
f.	Were all trust fun	d taxes remitted on a current basis?	Yes •	No 🔘	
g.	Was there any po (if yes, see Instruc	stpetition borrowing, other than trade credit? ctions)	Yes 🔿	No 💿	
h.	Were all payment the court?	s made to or on behalf of professionals approved by	Yes •	No O N/A O	
i.	Do you have:	Worker's compensation insurance?	Yes •	No 🔘	
		If yes, are your premiums current?	Yes •	No O N/A O	(if no, see Instructions)
		Casualty/property insurance?	Yes •	No 🔿	
		If yes, are your premiums current?	Yes •	No O N/A O	(if no, see Instructions)
		General liability insurance?	Yes 💿	No 🔘	
		If yes, are your premiums current?	Yes •	No O N/A O (if no, see Instructions)
j.	Has a plan of reor	ganization been filed with the court?	Yes •	No 🔘	
k.	Has a disclosure s	statement been filed with the court?	Yes •	No 🔘	
1.		vith quarterly U.S. Trustee fees as 8 U.S.C. § 1930?	Yes •	No 🔿	

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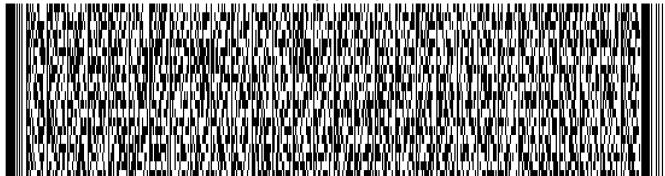
Deb	tor's Name Mercy Hospital, Iowa City, Iowa, et al.,	Case No. 23-00623				
Par	rt 8: Individual Chapter 11 Debtors (Only)					
a.	Gross income (receipts) from salary and wages	\$0				
b.	Gross income (receipts) from self-employment	\$0				
c.	Gross income from all other sources	\$0				
d.	Total income in the reporting period (a+b+c)	\$0				
e.	Payroll deductions	\$0				
f.	Self-employment related expenses	\$0				
g.	Living expenses	\$0				
h.	All other expenses	\$0				
i.	Total expenses in the reporting period (e+f+g+h)	\$0				
j.	Difference between total income and total expenses (d-i)	\$0				
k.	List the total amount of all postpetition debts that are past due	\$0				
1.	Are you required to pay any Domestic Support Obligations as defined by 11 U.S.C § 101(14A)?	Yes O No •				
m.	If yes, have you made all Domestic Support Obligation payments?	Yes O No N/A •				
thr bei is 1 law ma Ex Re wy con	§§ 704, 1106, and 1107. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6). The United States Trustee will also use this information to evaluate a chapter 11 debtor's progress through the bankruptcy system, including the likelihood of a plan of reorganization being confirmed and whether the case is being prosecuted in good faith. This information may be disclosed to a bankruptcy trustee or examiner when the information is needed to perform the trustee's or examiner's duties or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." <i>See</i> 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F). I declare under penalty of perjury that the foregoing Monthly Operating Report and its supporting documentation are true and correct and that I have been authorized to sign this report on behalf of the estate.					
Jin	n Porter	Porter				
Sign	nature of Responsible Party Printed	l Name of Responsible Party				
Ch	ief Financial Officer 03/20)/2024				
Titl	e Date					

Debtor's Name Mercy Hospital, Iowa City, Iowa, et al.,

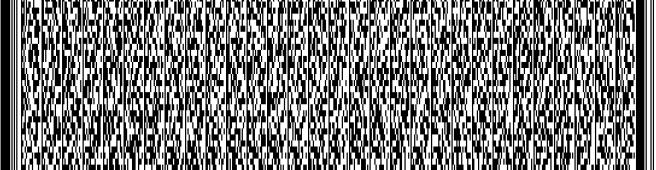




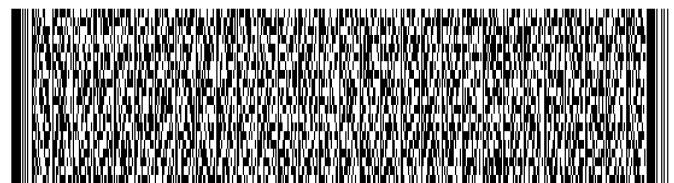
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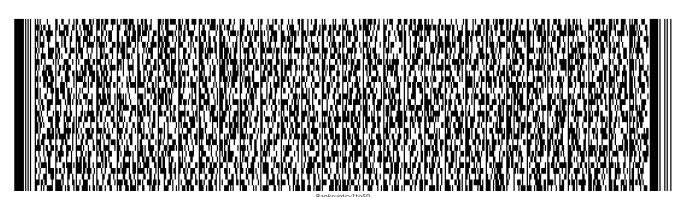
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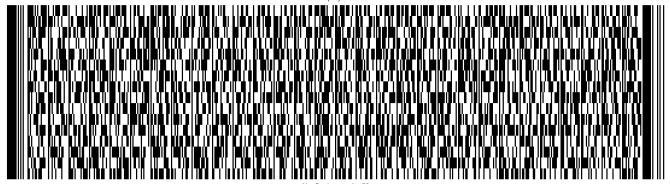
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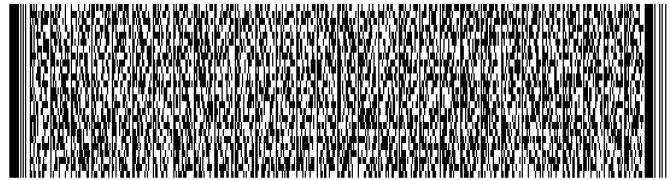


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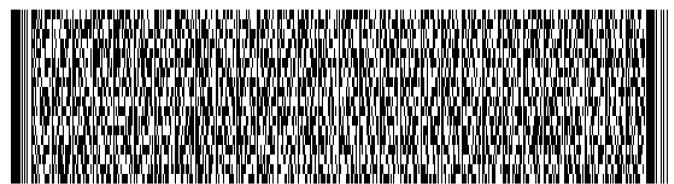
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